## FORM 1

14020434309

#### STATEMENT OF **ORGANIZATION**

SECRETARY OF THE SENATE

14 JUN 24 PM 2: 33

					O	fice Use Only
1. NAME OF COMMITTEE (ii	n full)	(Check if name is changed)		ble:If typing, type he lines.	12FE4M5	
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ADDRESS (number a	and street)	13/12 E	Blac	h Rd		
(Check if is change		<u> </u>	1 1 1	<u> </u>	<u> </u>	
. is change	.s., [(	chatitario	4		WA 191 STATE	9,0,0,3]-  ZIP CODE▲
COMMITTEE'S E-M	IAIL ADDRESS					
(Check if is change	address	Cummit, F. A.	MISIN	Com		
, , , , , , , , , , , , , , , , , , , ,	·	Optional Second E-Mail	Address	<u> </u>		
COMMITTEE'S WE  (Check if is change	address	ESS (URL)				
2. DATE	6 20	2014				
3. FEC IDENTIF	FICATION NUM	IBER ▶ C				
4. IS THIS STATE	EMENT X	NEW (N) OR	<u> </u>	AMENDED (A)		
I certify that I have	e examined this	Statement and to the b	est of my k	nowledge and belief it	t is true, correct ar	d complete.
Type or Print Nam	e of Treasurer	Ted C	umm	ings		
Signature of Treas	urer +	il =	$\searrow$		Date D G	20 2014
NOTE: Submission	of false, erroneo	us, or incomplete informat	tion may sub	ject the person signing	this Statement to the	e penalties of 2 U.S.C. §437g.
Office Use				For further information of Federal Election Commiss	contact:	FEC FORM 1 (Revised 06/2012)

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(a) (b) Na Ca Ca Par	PE OF C	om 1 (Revised 02/2009)  OMMITTEE  Committee:  This committee is a p  This committee is an information below.)	authorized con		(Complete			Page	
(a) (b) Na Ca Ca Par	me of indidate	Committee:  This committee is a p  This committee is an information below.)	authorized con		(Complete				
(b) Na Ca Ca Par	ndidate ndidate	This committee is an information below.)	authorized con		(Complete				
Na Ca Ca Par	ndidate ndidate	information below.)		nmittee, and is		the candidate inf	ormation below	<i>t</i> .)	
Ca Ca Par	ndidate ndidate	Ted Cu	MM		NOT a pri	ncipal campaign o	committee. (Co	mplete the can	didate
Par (c)			<u>euri Nij</u>	ـ ـ ـ ـ ـ ـ ك				1 1 1 1	
(c)	ty Affiliatio		Office			_		State	lu)
	•	on IND	Sought:	House	·X	Senate	President		, <b>-</b> 0
								District	,. <b>U</b>
	Χ,	This committee suppo	ts/opposes on	nly one candida	te, and is	NOT an authorize	d committee.		
	ne of ndidate	Ted Cu	MMINS	<u>S                                      </u>					
Pa	rty Com	mittee:							
(d)		This committee is a		(National, S or subordin		nittee of the		(Democratic, Republican, e	etc.) Par
Ро	litical Ad	ction Committee (P	AC):	· · · · · ·					
(e)		This committee is a se	parate segreg	ated fund. (Ider	ntify connec	cted organization o	on line 6.) Its co	nnected organi	ization is
		Corporation		•		w/o Capital Stoo		_	
		·					ĸ	Labor Orga	nization
		Membership C	rganization	ו	rade Asso	ciation		Cooperative	ł
		In addit	ion, this comm	ittee is a Lobbyi	st/Registra	nt PAC.			
(f)		This committee support committee. (i.e., noncor	ts/opposes mo inected commi	ore than one Fe ittee)	ederal cand	didate, and is NO	T a separate s	egregated fund	d or par
		In addition, this	committee is a	Lobbyist/Regis	trant PAC.				
		In addition, this	committee is a	Leadership PA	C. (Identify	sponsor on line 6	.)		
Joli	nt Fundr	aising Representa	tive:						
(g)		This committee collects committees/organization	contributions, particular, par	pays fundraising of which is an a	expenses authorized	and disburses ne committee of a fed	t proceeds for t leral candidate.	wo or more pol	itical
h)	•	This committee collects committees/organization	contributions, p is, none of whi	oays fundraising ch is an authoriz	expenses ed commit	and disburses net	proceeds for to ndidate.	wo or more poli	tical
	Comn	nittees Participating is	n Joint Fundi	raiser					
	<b>1</b> .				111	FEC ID num	per C		
	2.					FEC ID num	ber C		
	3.			<u> </u>		FEC ID num	per C		
	4. l					FEC ID numb			

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# 1402045431

#### FEC FORM 2

#### STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)  Ted CummiNSS	
(b) Address (number and street) ☐ Check if address changed	2. Candidate's FEC Identification Number
(c) City, State, and ZIP Code	
	3. Is This New Amended
Chattaroy WA 99003	Statement (N) OR (A)
	shryfor 5th District
DESIGNATION OF PRINCIPAL CAMPAIG	
7. I hereby designate the following named political committee as my Principal Campaign Com	mittee for the 2016 election(s).
NOTE: This designation should be filed with the appropriate office listed in the instructions.	(year or election)
(a) Name of Committee (in full)	
(a) Name of Committee (in tun)	
(b) Address (number and street)  Sevate CAM	pargn
19	
13/12 E Black Rd	
(c) City, State, and ZIP Code	
Chattaroy WA 99003	
DESIGNATION OF OTHER AUTHORIZED	
(Including Joint Fundraising Representative	ves)
8. I hereby authorize the following named committee, which is NOT my principal campaign committee.	nmittee, to receive and expend funds on behalf of my
candidacy.	
NOTE: This designation should be filed with the principal campaign committee.	
(a) Name of Committee (in full)	
(a) raine of committee (in rain)	
(b) Address (number and street)	
( )	
(c) City, State, and ZIP Code	
I certify that I have examined this Statement and to the best of my knowledge a	and belief it is true, correct and complete.
Signature of Candidate	Date
)	
+1 =	1 - 2 - 2
12h	6-20-2014
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing	
	FEC FORM 2 (REV. 02/2009)
	. CO : ONIN 2 (112 V. 02) 2009)

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### United States Senate

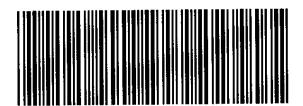
OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

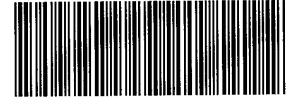
DANA K MECALLUM SUFERINTEINDENT

HAR HATE DIFFEE SUITE 232 WAEHINETON, DE 20518-71 PHONE (202) 224-0322

OFFICE OF PUBLIC HEADS
THE PRECEDING DOCUMENT WAS:
HAND DELIVERED
USPS FIRST CLASS MAILPostmark
USPS REGISTERED/CERTIFIEDPostmark
USPS PRIORITY MAIL
USPS EXPRESS MAIL Postmark
OVERNIGHT DELIVERY SERVICE: SHIPPING DATE NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS
UPS —————
DEL
AIRBORNE EXPRESS
RECEIVED FROM FEDERAL ELECTION COMMISSION  Date of Receipt  POSTMARK ILLEGIBLE   NO POSTMARK
FAXDate of Receipt
OMITER TO STATE
Date of Receipt of Postmark  Date of Receipt of Postmark  DATE PREPARED 6-24-14



SEN PATCH



SEN PATCH